

Fill in this information to identify the case:

Debtor Name House of Dear LLC

United States Bankruptcy Court for the: Northern District of



Texas Case number: 24-30068

☐ Check if this is an amended filing

## Official Form 425C

### Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: Jan 2024

Date report filed:

MM/DD/YYYY

Line of business: hair products

NAISC code:

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party:

Holly Dear

Original signature of responsible party

Printed name of responsible party

Holly Dear

#### 1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

**If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.**

- |  | Yes                                 | No                       | N/A                      |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Did the business operate during the entire reporting period?                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month?                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes?                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings?                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.**

- |   |                          |                                     |                          |
|---|--------------------------|-------------------------------------|--------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts?                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses?                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf?                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name House of Dear LLCCase number 24-300617. Have you paid any bills you owed before you filed bankruptcy? ☐ ☒ ☐18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy? ☐ ☒ ☐**2. Summary of Cash Activity for All Accounts****19. Total opening balance of all accounts**

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ 3,053.00**20. Total cash receipts**

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.\$ 2,996.00**21. Total cash disbursements**

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.- \$ 4,651.00**22. Net cash flow**

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.+ \$ -1,655.00**23. Cash on hand at the end of the month**

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 1,397.00**3. Unpaid Bills**

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

**24. Total payables***(Exhibit E)*

\$ \_\_\_\_\_

Debtor Name House of Dear LLCCase number 24-3006**4. Money Owed to You**

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables \$ 0.00  
(Exhibit F)

**5. Employees**

26. What was the number of employees when the case was filed? \_\_\_\_\_  
27. What is the number of employees as of the date of this monthly report? \_\_\_\_\_

**6. Professional Fees**

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 4,238.00  
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 0.00  
30. How much have you paid this month in other professional fees? \$ 0.00  
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

**7. Projections**

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	<b>Projected</b>	—	<b>Actual</b>	=	<b>Difference</b>
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ _____	—	\$ _____	=	\$ _____
33. Cash disbursements	\$ _____	—	\$ _____	=	\$ _____
34. Net cash flow	\$ _____	—	\$ _____	=	\$ _____
35. Total projected cash receipts for the next month:					\$ _____
36. Total projected cash disbursements for the next month:					- \$ _____
37. Total projected net cash flow for the next month:					= \$ _____

Debtor Name House of Dear LLC

Case number 24-3006

## 8. Additional Information

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If available, check the box to the left and attach copies of the following documents.

- ☐ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.



PO Box 130  
Durant OK 74702  
RETURN SERVICE REQUESTED

www.firstunitedbank.com  
First United - 20  
8201 Preston Road, Suite 265  
Dallas, TX 75225

Customer Service (800) 924-4427

Account XXXXXX4165

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House of Dear LLC  
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Hold Mail - Bankruptcy  
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## CHECKING ACCOUNTS

### United Business Free Checking

Account Number	XXXXXX4165
Previous Balance	\$3,053.50
14 Deposits/Credits	\$2,996.03
8 Checks/Debits	\$4,651.71
Service Charge	\$0.00
Interest Paid	\$0.00
Current Balance	\$1,397.82

Number of Enclosures	0
Statement Dates	1/01/24 thru 1/31/24
Days in Statement Period	31
Average Ledger	\$1,621.04
Average Collected	\$1,621.04

### Credit Transactions

Date	Description	Amount
1/05	HoD Wholesale TRANSFER ST-I8G1A5M7M4R5HOLLY DEAR	\$412.53
1/10	Shopify TRANSFER ST-V8I7D4E9J1A1HOUSE OF DEAR	\$71.14
1/11	Shopify TRANSFER ST-U4O5A2J9V4M8HOUSE OF DEAR	\$196.73
1/11	AMAZON.CHUUVUYMBPAYMENTS 1JG3NPOIEDY50F3Holly Dear	\$328.52
1/11	melio House of D e38790116 House of Dear,	\$510.00
1/12	Shopify TRANSFER ST-F3V5W1O0Y1C9HOUSE OF DEAR	\$238.77
1/17	Shopify TRANSFER ST-E3C6O7Z6U4C0HOUSE OF DEAR	\$183.76
1/22	Shopify TRANSFER ST-G2P4B0R9E7Y6HOUSE OF DEAR	\$390.64
1/23	Shopify TRANSFER ST-T4I9L2U4W7A0HOUSE OF DEAR	\$109.39
1/25	AMAZON.C1PFU5XVHPAYMENTS 2QFZ4L2BXB53DEMHolly Dear	\$99.51
1/25	Shopify TRANSFER ST-M5B4W9X6Q8I0HOUSE OF DEAR	\$165.28
1/29	FAIRE WHOLESALE ORDER 19046730 House of Dear	\$41.70
1/29	Shopify TRANSFER ST-W6W3U0T1L0Q6HOUSE OF DEAR	\$84.31
1/31	Shopify TRANSFER ST-E8C7V2X6R1M3HOUSE OF DEAR	\$163.75

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Please examine this statement and cancelled checks promptly. You have (30) days to report unauthorized or missing signatures or alterations on the items contained with your statement; if you fail to notify us we will not be responsible for items paid in good faith. If no errors or discrepancies concerning Electronic Funds Transactions are reported within sixty (60) days, all such transactions will be considered correct. All other errors or discrepancies concerning your account must be reported within thirty (30) days or the statement will be considered correct.

MONTH \_\_\_\_\_ YR \_\_\_\_\_

CHECKS OUTSTANDING			
CHECK NO.	PAYEE	AMOUNT	
		\$	
TOTAL		\$	

BANK BALANCE THIS STATEMENT \$ \_\_\_\_\_

ADD DEPOSITS NOT CREDITED \$ \_\_\_\_\_

SUB-TOTAL \$ \_\_\_\_\_

LESS CHECKS OUTSTANDING \$ \_\_\_\_\_

BALANCE \$ \_\_\_\_\_

THIS BALANCE SHOULD AGREE WITH YOUR CHECK BOOK BALANCE AFTER DEDUCTING THE SERVICE CHARGES (IF ANY) SHOWN ON THIS STATEMENT. IF AN ERROR IS FOUND IN YOUR STATEMENT IT SHOULD BE REPORTED TO US WITHIN 10 DAYS.

#### TERMS GOVERNING CHECKING ACCOUNTS

Deposit in or presentment to the Bank of any item for a customer's account shall constitute the customer's consent to the terms hereof with respect to the Checking Account and all items deposited herein or presented to the Bank for payment.

All deposits and collections shall be governed by the pertinent provisions of the Uniform Commercial Code – Bank Deposits & Collection, as from time to time amended, or as varied by agreements permitted by the statute, including those hereinafter set out.

Receipt from others of items for credit to a customer's account shall render the customer liable to the Bank to the same extent as though they had been endorsed by and received directly from the customer. No money or item shall be deemed to have been received by the Bank unless and until it shall have issued a receipt therefor. The account shall at all times be subject to Checking and Maintenance Charges according to the practice of the Bank prevailing at the time.

When the Bank deems such action proper, the Bank may require that the account be closed.

The provisions hereof shall control, in event of conflict with any deposit slip or passbook.

The Bank reserves the right to change the provisions hereof by printing on its statement Terms Governing Checking Accounts, incorporating the Change.

The new Terms Governing Checking Accounts will be effective, prospectively, when the statement containing the change is made available to the customer, by mailing or otherwise.

#### IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

In Case of Errors or Questions About Your Electronic Transfers, telephone us or write us at the address below as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared.

(1) Tell us your name and account number.

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error. We will tell you the results within three business days after completing our investigation. If we decide there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

FIRST UNITED BANK & TRUST (DIRECT INQUIRIES CALL CENTER)

PO BOX 130 • DURANT, OKLAHOMA 74702 • (800) 924-4427 • MEMBER FDIC

Account  
XXXXXX4165Page  
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## Debit Transactions

Date	Description	Amount
1/02	Transfer to Loan Acct No. 403319387	\$1,343.75-
1/03	PIXELMONGERS, LLSALE HOUSE OF DEAR	\$300.00-
1/03	CLEVER MONKEY D/SALE HOUSE OF DEAR	\$811.88-
1/12	AMEX EPAYMENT ACH PMT W1514 House of Dear	\$500.00-
1/22	WEBFILE TAX PYMTDD 902/74602538 33311/12345/EDI	\$46.08-
1/22	AMEX EPAYMENT ACH PMT W3756 House of Dear	\$500.00-
1/22	AMEX EPAYMENT ACH PMT W2700 House of Dear	\$500.00-
1/31	PIXELMONGERS, LLSALE HOUSE OF DEAR	\$650.00-

## Daily Balance Summary

Date	Balance	Date	Balance	Date	Balance
1/01	\$3,053.50	1/11	\$2,116.79	1/23	\$1,493.27
1/02	\$1,709.75	1/12	\$1,855.56	1/25	\$1,758.06
1/03	\$597.87	1/17	\$2,039.32	1/29	\$1,884.07
1/05	\$1,010.40	1/22	\$1,383.88	1/31	\$1,397.82
1/10	\$1,081.54				